2004-12-06 22:22:34 (GMT)

DEC 0 6 2004

PTO/SB/22 (10-00)

Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.									
PETITIC	N FOR	REXTENSION OF	TIME UNDER 37 C	FR 1.136(a)	Docket Number (Optional) 07589.0124.PCUS00				
			In re Application of	HAKANSSON					
			Application Number	Filed 07/18/2003					
			For APPARATUS FOR CONTROLLING A LUBRICATION FLUID LEVEL						
			Group Art Unit Examiner 3747 KAMEN						
	•	est under the provisiones above identified ap	·	a) to extend the per	iod for filing a				
The re	equeste	d extension and appro eriod desired):		ty fee are as follow	28				
•		One month (37 CFR	(1.17(a)(1))		\$				
	\boxtimes	Two months (37 CF		\$430.00					
		Three months (37 C			\$				
		Four months (37 Cf			\$				
		Five months (37 CF		\$					
	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown								
	above is reduced by one-half, and the resulting fee is: \$								
	A check in the amount of the fee is enclosed.								
	Paym	ent by credit card. Fo	orm PTO-2038 is attac	ched.					
	The C	Commissioner has alre	eady been authorized	to charge fees in the	his				
	application to a Deposit Account.								
	The C	Commissioner is heret	by authorized to charg	ge any fees which r	nay be required,				
	or cre	edit any overpayment	, to Deposit Account I	Number <u>14-1437</u> .					
		e enclosed a duplicate	e copy of this sheet.						
l am ti	he 🔲 ar	pplicant/inventor.							
	assignee of record of the entire interest. See 37 CFR 3.71								
	Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
	🛛 at	torney or agent of rec	ord.						
	attorney or agent under 37 CFR 1.34(a).								
		Registration number if ac	ting under 37 CFR 1.34(a).		·				
		·			information should not ization on PTO-2038.				
}_		12/06/2004		Marin	Muce				
 12/67/2004		Date		Signature					
7/21				Tracy W. Druce					
Typed or printed name									
				erest or their representati	lve(s) are required. Submit multiple				
rom ii emigii	e than one	e signature is required, see							
(53)	 	ns are submitted.	A 4 hours to constant 2000		on anote of the individual engal have				

Barrier Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

16664428

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Petent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

		rd A	NICHA	ITT.	ΛI				γ	omprete it Kno	wn		
FEE TRANSMITTAL						Applic	Application Number 10/604,420						
for FY 2002							Filing Date 07/			18/2003			
						First N	lamed in	wentor	HAK	ANSSON			
	d revision.		Exam	Examiner Name KA			MEN						
			Group	Group / Art Unit			3747						
TOTAL AMOUNT OF PAYMENT (\$) 818						Attorn	Attorney Docket No.			07589.0124.PCUS00			
M	ETHOD	OF PAYN	ENT (check a	i that appl	y)				FEE C	ALCULATION (co	ontinued)		
☐ Check 🔯	Condit c	omt []	Money 🔲 (Other []	None	3. ADI	ANOITH egral	L FEES	Small				
Order						Fee	Entity Fee	Fee	Entity			Fee	
Deposit Acc	ount:			·		Code	(\$)	Code	(\$)		Description	Paid	
Deposit Account 141437 Number				105 127	130 50	205 227	65 25	Surcharge - late Surcharge - late or cover sheet.					
Doggait							130	139	130	Non-English spe	ecification		
Account	Deposit Account NOVAK DRUCE LLP		147	2,520	147	2.520	•	notion mexical resident					
Name			·····		112	920*	112	920*	Requesting pub Examiner action	lication of SIR prior to			
The Commissioner is authorized to: (check all that apply) Charge fee(s) indicated below Commission Charge any additional fee(s) during the pendency of this application						113	1.840*	113	1.840*	Requesting publication			
☐ Charge fee(s) indicat	ed below	, except for t			115 116	110 400	215 218	55 200		ply within first month		
to the above-ide	ntified d				<u></u>	110	400	210	200	month	ply within second	430 .	
FEE CALCULATION 1. BASIC FILING FEE						117 118	920 1,440	217 218	460 720	Extension for re	ension for reply within third month position for reply within fourth		
Large Entity Fee Fee	Small Fee	Entity Fee	Fee Descripti	on		128	1,960	228	980	month Extension for re	ply within fifth month		
Code (\$)	Code	(\$)	i oo ooonga	.	Fee Paid	119	320	219	160	Notice of Appea	•		
101 740	201	370	Utility filing fee			120	320	220	160		support of an appeal		
106 330 107 510	206 207	165 255	Design filing for Plant filing fee			121	280	221	140	Request for oral			
108 740	208	370	Reissue filing			138	1,510	138	1,510	Petition to Institu	ite à public use		
114 160 214 80 Provisional filing fee					140	110	240	55	Petition to revive	e – unavoidable			
	8	UBTOTA	L (3)		(\$)0	141	1.280	241	640		lancimatrium = 1		
						142	1,280 460	242 243	640 230	Utility issue fee Design issue fee	· · · · · · · · · · · · · · · · · · ·		
2. EXTRA CLA	IM FEES	}	Extra	Fee from	Fee	144	620	244	310	Plant issue fee	,		
		•	Claims	below	Peld	122	130	122 .	130	Petitions to the	Commissioner		
Total Claims = 0 X = 0				123	50	123	50	_	under 37 CFR 1.17 (q)				
Independent Claims 4	have the second that the second t		126	180	126	180	Submission of Ir						
Multiple Dependent	S N	P.44	X	300	= 300	581	40	581 [^]	40	per property (thr properties)	palent assignment les number of		
Large Entit	y Small Fee	EntH Fee		_41		146	740	246	370	Filing a submiss (37 CFR § 1,129	lon after final rejection		
Code (\$) 103 18	Code 203	(\$) 9	Fee Descri Claims in e		•	149	740	249	370	- -	nal invention to be		
102 84 104 280	202 204	42 140	Independer		excess of 3 im, if not paid	179	740	279	370	Request for Contin	ued Examination (RCE)		
		42	•		at claims over	169	900	169	900	Request for exped		\vdash	
109 84	209	42	original pat	ent						of a design applic			
110 18	210	9	"" Keissue i over origina		ccess of 20 and								
		S	UBTOTAL (2)	Other fo	Other fee (specify)								
**or number pre	eviously	pald, if g	reater, For Re	issues, se	e above	*Redu	ced by Ba	asic Filin	g Fee Pa	ald SUBT	OTAL (3) (\$) 430	}	
SUBMITTED BY	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			T			· · · · · · · · · · · · · · · · · · ·			Com	piete (if applicable)		
Name (Print/Type	,	Tracy W	. Druce	Regis	vation No. Atto	mey/Agent)	35,	493		Telephone	202.293.7333	<u> </u>	
Signature			20	en	hee	2				Dale	12/06/2004		
	w	APNING-	Information	on the for	n may harome	nublic Co	hran film	Informa	itlan shi	ould not be			

included on this form. Provide credit card information and authorization on PTO-2038.